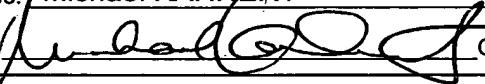


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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	METHOD AND APPARATUS FOR SUBSCRIBER CONTROL OF AN INBOUND CALL	
<p>As the below named inventor(s), I/we declare that:</p> <p>This declaration is directed to:</p> <p><input checked="" type="checkbox"/> The attached application, or</p> <p><input type="checkbox"/> Application No. _____, filed on _____,</p> <p><input type="checkbox"/> as amended on _____ (if applicable);</p> <p>I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;</p> <p>I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;</p> <p>I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.</p> <p>All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.</p>		

FULL NAME OF INVENTOR(S)	
Inventor one:	L. Lloyd WILLIAMS
Signature:	
Citizen of: Canada	
Inventor two:	Michael KAHNERT
Signature:	
Citizen of: Canada	
Inventor three:	_____
Signature:	_____
Citizen of: _____	
Inventor four:	_____
Signature:	_____
Citizen of: _____	
<input type="checkbox"/> Additional inventors or a legal representative are being named on _____ additional form(s) attached hereto.	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

APPLICATION INFORMATION

Application Type:: Regular (Utility)
Title:: METHOD AND APPARATUS FOR SUBSCRIBER
CONTROL OF AN INBOUND CALL
Attorney Docket Number:: 9-16310-76US
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 10
Small Entity?:: Yes

INVENTOR INFORMATION

Inventor Authority Type:: Inventor
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Inventor Authority Type:: Inventor
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Representative Customer Number:: 020988

ASSIGNEE INFORMATION

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	L. Lloyd WILLIAMS
Title	METHOD AND APPARATUS FOR SUBSCRIBER... CALL
Art Unit	
Examiner Name	
Attorney Docket Number	9-16310-76US

I hereby appoint:

Practitioners associated with the Customer Number:

020988

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

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OR

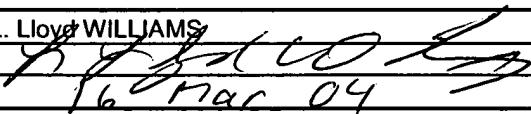
<input checked="" type="checkbox"/>	Firm or Individual Name	OGILVY RENAULT
Address	1981 McGill College Avenue	
Address	Suite 1600	
City	Montreal	State Quebec Zip H3A 2Y3
Country	Canada	
Telephone	514-845-7126	Fax 514-288-8389

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	L. Lloyd WILLIAMS	
Signature		
Date	16 Mar 04	Telephone 613-254-5454

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	L. Lloyd WILLIAMS
Title	METHOD AND APPARATUS FOR SUBSCRIBER...CALL
Art Unit	
Examiner Name	
Attorney Docket Number	9-16310-76US

I hereby appoint:



Practitioners associated with the Customer Number:

020988

OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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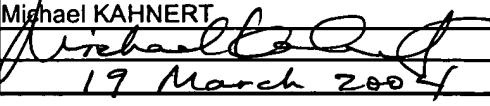
<input checked="" type="checkbox"/>	Firm or Individual Name	OGILVY RENAULT
Address	1981 McGill College Avenue	
Address	Suite 1600	
City	Montreal	State Quebec Zip H3A 2Y3
Country	Canada	
Telephone	514-845-7126	Fax 514-288-8389

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Michael KAHNERT
Signature	
Date	19 March 2004
	Telephone 613-254-5454

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.



*Total of 2 forms are submitted.

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